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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	5	Attorney Docket Number	297794
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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i> 5 Foreign Patent Documents; and 2 Non-patent literature documents Credit Card Payment form acknowledgment postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Faegre & Benson LLP		
Signature			
Printed Name	Damon A. Rieth		
Date	7/25/2006	Reg. No.	52,167

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Docket No.: 74120-297794

In re Application of:) Examiner: Rasha S. Al Aubaidi
Brett P. Hollman et al.)
Serial No.: 10/057,362) Art Unit: 2642
Filed: January 25, 2002) Confirmation No.: 2005
For: ROUTING ENGINE FOR)
TELECOMMUNICATIONS)
NETWORK)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. 1.97(B)(3) AND 1.98

Dear Sir:

The Information Disclosure Statement submitted herewith is being filed before the mailing date of any of a final action under § 1.113, a notice of allowance under § 1.311, or an action that otherwise closes prosecution in the application, and it is accompanied by the fee set forth in § 1.17(p) in the amount of \$180.00

The Examiner is requested to consider the references noted on the enclosed Form PTO/SB/08a-b during examination of the above-identified patent application. These references are submitted for the Examiner's consideration and are submitted pursuant to the duty of disclosure under 37 C.F.R. § 1.56. In submitting these references, no representation is made or implied that the references are or are not material to the examination of the application. The Examiner is encouraged to make his or her own determination of materiality. In accordance with 37 C.F.R. § 1.98(a)(2)(i), copies of the U.S. references are not provided herewith.

07/28/2006 EAYALEW1 00000062 10057362

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Atty. Docket No.: 74120-297794
Serial No.: 10/057,362

INVITATION FOR A TELEPHONE INTERVIEW

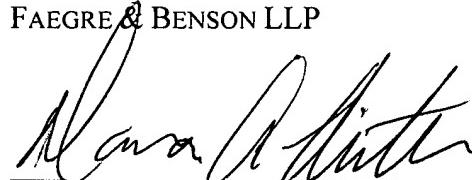
If the Examiner has any questions concerning the relevance of any reference cited in this disclosure, the Examiner is respectfully requested to call the undersigned at (303) 607-3633 if there remains any issue with allowance of the case.

CHARGE OUR DEPOSIT ACCOUNT

Pursuant to 37 C.F.R. § 1.97(b)(2), a fee in the amount of \$180.00 is due with respect to this filing. A credit card payment form in the amount of \$180.00 is enclosed herewith. However, please charge any shortage to our deposit account No. 06-0029.

Respectfully submitted,

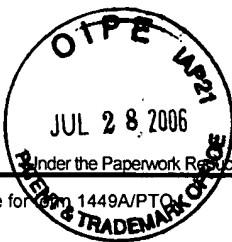
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Tel: (303) 447-3648

Date: July , 2006



JUL 28, 2006

PTO/SB/08A (07-05)

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Substitute for GOM 1449A/P
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

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Complete if Known	
Application Number	10/057,362; Confirmation 2005
Filing Date	1/25/2002
First Named Inventor	Brett P. Hollman
Art Unit	2642
Examiner Name	Rasha S. Al Aubaidi
Attorney Docket Number	297794

Examiner Signature		Date Considered	
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⁴EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ⁵Applicant's unique citation designation number (optional). ⁶See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ⁷Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁸For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁹Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ¹⁰Applicant is to place a check mark here if English language Translation is attached.

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Substitute for form 1449B/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		<i>Application Number</i>	10/057,362; Confirmation 2005
		<i>Filing Date</i>	1/25/2002
		<i>First Named Inventor</i>	Hollman
		<i>Art Unit</i>	2642
		<i>Examiner Name</i>	Rasha S. Al Aubaidi
(Use as many sheets as necessary)			
Sheet	2	of	2
		<i>Attorney Docket Number</i>	

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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